



1645
JFW

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/298,523	
	Filing Date	April 23, 1999	
	First Named Inventor	Briles	
	Group Art Unit	1645	
	Examiner Name	Minnifield	
Total Number of Pages in This Submission	4	Attorney Docket Number	57909/428

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> A copy of the Notice to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Declaration and Power of Attorney <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Request for Corrected Filing Receipt with Enclosures <input checked="" type="checkbox"/> A self-addressed, prepaid postcard for acknowledging receipt <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <input checked="" type="checkbox"/> PTO-1449 Form (in duplicate) and 1 reference
Remarks	<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 14-1138 for the above identified docket number.	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Alice Y. Choi Nixon Peabody LLP Clinton Square, P.O. Box 31051 Rochester, New York 14603-1051 Telephone: (585) 263-1508 Fax: (585) 263-1600
Signature	<i>Alice Y. Choi</i> Registration No. 45,758
Date	<i>July 21, 2004</i>

CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)]	
I hereby certify that this correspondence is being:	
<input checked="" type="checkbox"/> deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450	
<input type="checkbox"/> transmitted by facsimile on the date shown below to the United States Patent and Trademark Office at (703) _____	
<i>July 21, 2004</i> Date	<i>Ruth R. Smith</i> Signature Ruth R. Smith Typed or printed name

FEE TRANSMITTAL FOR FY 2004

Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

AMOUNT OF PAYMENT

(\$ 180)

Complete if Known

Application Number 09/298,523

Filing Date April 23, 1999

First Named Inventor Briles

Examiner Name Minnifield

Art Unit 1645

Attorney Docket No. 57909/428

METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit Card ☐ Money Order ☐ Other ☐ None

☐ Deposit Account:

Deposit Account Number 14-1138

Deposit Account Name Nixon Peabody LLP

The Commissioner is authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☒ Credit any overpayments

☒ Charge any additional fee(s)

☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description	Fee Paid
1001	770	2001	385	Utility filing fee	
1002	340	2002	170	Design filing fee	
1003	530	2003	265	Plant filing fee	
1004	770	2004	385	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	

SUBTOTAL (1) (\$ 0)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
	-20** =	X	= 0
Independent Claims	-3** =	X	= 0
Multiple Dependent		X	= 0

Large Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description
1202	18	2202	9	Claims in excess of 20
1201	86	2201	43	Independent claims in excess of 3
1203	290	2203	145	Multiple dependent claim, if not paid
1204	86	2204	43	** Reissue independent claims over original patent
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ 0)

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description
1051	130	2051	65	Surcharge - late filing fee or oath
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet
1053	130	2053	130	Non-English specification
1812	2,520	1812	2,520	For filing a request for <i>ex parte</i> reexamination
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action
1251	110	2251	55	Extension for reply within first month
1252	420	2252	210	Extension for reply within second month
1253	950	2253	475	Extension for reply within third month
1254	1,480	2254	740	Extension for reply within fourth month
1255	2,010	2255	1,005	Extension for reply within fifth month
1401	330	2401	165	Notice of Appeal
1402	330	2402	165	Filing a brief in support of an appeal
1403	290	2403	145	Request for oral hearing
1451	1,510	1451	1,510	Petition to institute a public use proceeding
1452	110	2452	55	Petition to revive - unavoidable
1453	1,330	2453	665	Petition to revive - unintentional
1501	1,330	2501	665	Utility issue fee (or reissue)
1502	480	2502	240	Design issue fee
1503	640	2503	320	Plant issue fee
1460	130	1460	130	Petitions to the Commissioner
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)
1806	180	1806	180	Submission of Information Disclosure Stmt
8021	40	8021	40	Recording each patent assignment per property (times number of properties)
1809	770	2809	385	Filing a submission after final rejection (37 CFR 1.129(a))
1810	770	2810	385	For each additional invention to be examined (37 CFR 1.129(b))
1801	770	2801	385	Request for Continued Examination (RCE)
1802	900	1802	900	Request for expedited examination of a design application

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 180)

CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)]

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☐ transmitted by facsimile on the date shown below to the United States Patent and Trademark Office at (703) _____

July 21, 2004
Date

Ruth R. Smith
Signature

Ruth R. Smith
Typed or printed name

SUBMITTED BY

Name (Print/Type) Alice Y. Choi

Registration No. 45,758
(Attorney/Agent)

Signature *Alice Y. Choi*

Complete (if applicable)

Telephone (585) 263-1508

Date July 21, 2004

SEND TO: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450



PATENT
Docket No.: 57909/428

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s) :	Briles et al.)	Examiner:
)	N. Minnifield
Serial No. :	09/298,523)	
)	Art Unit:
Cnfrm. No. :	2114)	1645
)	
Filed :	April 23, 1999)	
)	
For :	PNEUMOCOCCAL SURFACE PROTEIN C (PspC),)	
	EPITOPIC REGIONS AND STRAIN SELECTION)	
	THEREOF, AND USES THEREFOR)	

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT
UNDER 37 CFR §§ 1.97-1.98

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Pursuant to 37 CFR §§ 1.97-1.98, applicants hereby bring to the attention of the United States Patent and Trademark Office, the enclosed reference listed on the attached PTO-1449 form.

Pursuant to 37 CFR §§ 1.17(p) and 1.97(c), enclosed is a check for \$180.00 to cover the required filing fee. The Commissioner is hereby authorized to charge any additional fees, or credit any overpayment to Deposit Account No. 14-1138.

07/26/2004 SDIRETA1 00000005 05298523

01 FC:1806

180.00 GP

Respectfully submitted,

Date: July 21, 2004

Alice Y. Choi
Alice Y. Choi
Registration No. 45,758

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Certificate of Mailing - 37 CFR 1.8(a)	
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<u>July 21, 2004</u> Date	<u>Ruth R. Smith</u> Ruth R. Smith



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INFORMATION DISCLOSURE STATEMENT BY APPLICANT (use as many sheets as necessary)				Complete if Known	
				Application Number	09/298,523
				Filing Date	April 23, 1999
				First Named Inventor	Briles
				Art Unit	1645
Examiner Name	Nita M. Minnifield				
Sheet	1	of	1	Attorney Docket Number	57909/428

U.S. PATENT DOCUMENTS					
Examiner Initials ¹	Cite No. ¹	U.S. Patent Document	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number - Kind Code ² (if known)			
		US-			
		US-			
		US-			
		US-			
		US-			
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		US-			
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		US-			
		US-			

FOREIGN PATENT DOCUMENTS						
Examiner Initials ¹	Cite No. ¹	Foreign Patent Document	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T ⁶
		Country Code ³ Number ⁴ Kind Code ⁵ (if known)				

OTHER PRIOR ART - NON PATENT LITERATURE DOCUMENTS			
Examiner Initials ¹	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²
	1	Briles, "PspA's Affect on Lactoferrin Killing of Pneumococci," National Institute of Health/National Institute of Allergy and Infectious Diseases Grant No. 1 RO1 AI0610 38- 01, pp. 2 (2003)	

Examiner Signature		Date Considered	
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Applicant's unique citation designation number (optional). ² See Kinds Codes of USPTO Patent Documents at www.uspto.gov or MPEP 901.04. ³ Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). ⁴ For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. ⁵ Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.16 if possible. ⁶ Applicant is to place a check mark here if English language Translation is attached.

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